

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Div. Environmental Health, 11 SHS
(207) 287-2070 FAX (207) 287-4172

PROPERTY LOCATION		>> CAUTION: LPI APPROVAL REQUIRED <<	
City, Town, or Plantation	LAMOINE	Town/City	Lamoine Permit # 1909
Street or Road	BOULDER COVE ROAD	Date Permit Issued	7.25.18 Fee \$ 265 Double Fee C j ed ()
Subdivision, Lot #	LOT #10	Local Plumbing Inspector Signature	Rebecca O'Brien L.P.I. # 394
OWNER/APPLICANT INFORMATION		Fee: \$ 265 state min. fee / \$ Locally adopted fee	
Name (last, first, MI)	HARPER, TIM	Copy: <input type="checkbox"/> Owner <input type="checkbox"/> Town <input checked="" type="checkbox"/> State	
Mailing Address of	P.O. BOX 1206	The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with the application and the Maine Subsurface Wastewater Disposal Rules.	
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant	SOUTHWEST HARBOR, ME. 04679		
Daytime Tel. #	(207) 266-9286	Municipal Tax Map #	3 Lot # 12-10
OWNER OR APPLICANT STATEMENT		CAUTION: INSPECTION REQUIRED	
I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a permit.		I have inspected the installation authorized above and found it to be in compliance with Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant		Local Plumbing Inspector Signature	
Date 7/25/18		(1st Date Approved)	
		(2nd Date Approved)	

PERMIT INFORMATION

TYPE OF APPLICATION	THIS APPLICATION REQUIRES	DISPOSAL SYSTEM COMPONENT(S)
<input checked="" type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type Replaced: _____ Year Installed: _____ <input type="checkbox"/> 3. Expanded System <input type="checkbox"/> a. Minor Expansion <25% <input type="checkbox"/> b. Major Expansion ≥ 25% <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	<input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance <input type="checkbox"/> a. Local Plumbing Inspector Approval <input type="checkbox"/> b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	<input checked="" type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous components
SIZE OF PROPERTY	DISPOSAL SYSTEM TO SERVE	TYPE OF WATER SUPPLY
_____ sq. ft. _____ acres <input checked="" type="checkbox"/> 2+	<input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: 3 <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input type="checkbox"/> 3. Other: (SPECIFY) _____	<input checked="" type="checkbox"/> Proposed <input type="checkbox"/> Existing <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____
SHORELAND ZONING	Current Use: <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK	DISPOSAL FIELD TYPE & SIZE	GARBAGE DISPOSAL UNIT	DESIGN FLOW
<input checked="" type="checkbox"/> 1. Concrete <input checked="" type="checkbox"/> a. Regular <input type="checkbox"/> b. Low Profile <input type="checkbox"/> c. with lift station <input type="checkbox"/> 2. Plastic <input type="checkbox"/> 3. Other: _____ CAPACITY 1000 gallons	<input type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input checked="" type="checkbox"/> 3. Proprietary Device 18 SIDE FEED CONCRETE CHAMBERS <input type="checkbox"/> a. Cluster Array <input checked="" type="checkbox"/> c. Linear <input checked="" type="checkbox"/> b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE 1386 sq. ft. lin. ft.	<input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment Tank <input type="checkbox"/> b. _____ Tanks in Series <input type="checkbox"/> c. Increase in Tank Capacity <input type="checkbox"/> d. Filter on Tank Outlet	270 gallons per day BASED ON <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities
SOIL DATA & DESIGN CLASS	DISPOSAL FIELD SIZING	EFFLUENT/EJECTOR PUMP	LATITUDE AND LONGITUDE
PROFILE CONDITION 9, 1, D at Observation Hole # 2 Depth 12" OF MOST LIMITING SOIL FACTOR	<input type="checkbox"/> 1. Medium - 2.6 sq. ft./gpd <input type="checkbox"/> 2. Medium-Large - 3.3 sq. ft./gpd <input type="checkbox"/> 3. Large - 4.1 sq. ft./gpd <input checked="" type="checkbox"/> 4. Extra Large - 5.0 sq. ft./gpd	<input type="checkbox"/> 1. Not Required <input type="checkbox"/> 2. May be Required <input checked="" type="checkbox"/> 3. Required Specify only for engineered systems DOSE: _____ gallons	<input type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA at center of disposal area Lat. 44° 28' 15.2" N Lon. 68° 21' 10.8" W if g.p.s., state margin of error 30'

SITE EVALUATOR STATEMENT

I certify that on 6-26-18 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241).

Site Evaluator Signature: William A. LaBelle, Jr. SE# 319 Date 7-6-18
 WILLIAM A. LaBELLE, JR. (207) 537-5900 labellesepatic@rivah.net

Site Evaluator Name Printed: William A. LaBelle, Jr. Telephone Number: (207) 537-5900 E-mail Address: labellesepatic@rivah.net
 Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

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Town, City, Plantation
LAMOINE

Street, Road, Subdivision **LOT 10**
BOULDER COVE ROAD

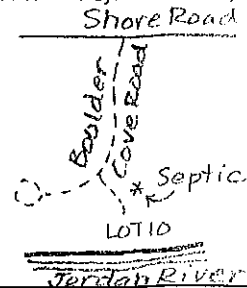
Owner or Applicant Name
TIM HARPER

SITE PLAN

Scale 1" = **50** Ft.

(SEE ATTACHED SITE PLAN)

SITE LOCATION PLAN
(Attach map from Maine Atlas
for First Time System Variance)



TP#3: 9-D, 12" S.G.W.T. / RESTRICTIVE, 4%

SOIL PROFILE DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above or on pg. 2A)

Observation Hole **#1** ☒ Test Pit ☐ Boring

1 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
SILTY CLAY LOAM TO CLAY	FRIABLE COMPACTED	DARK YELLOWISH BROWN (10YR 3/4) LIGHT OLIVE BROWN (2.5Y 5/4)	N.E. FEW DISTINCT
10			
20			
30			
40			
50			

Soil **9** Classification **D** Slope **2-4%** Limiting Factor **13"**
Profile Condition Depth

☒ Ground Water
☐ Restrictive Layer
☐ Bedrock
☐ Pit Depth

Observation Hole **#2** ☒ Test Pit ☐ Boring

1 " Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
SILTY CLAY LOAM TO CLAY	FRIABLE COMPACTED	DARK YELLOWISH BROWN (10YR 3/4) LIGHT OLIVE BROWN (2.5Y 5/4)	N.E. FEW FAINT
10			
20			
30			
40			
50			

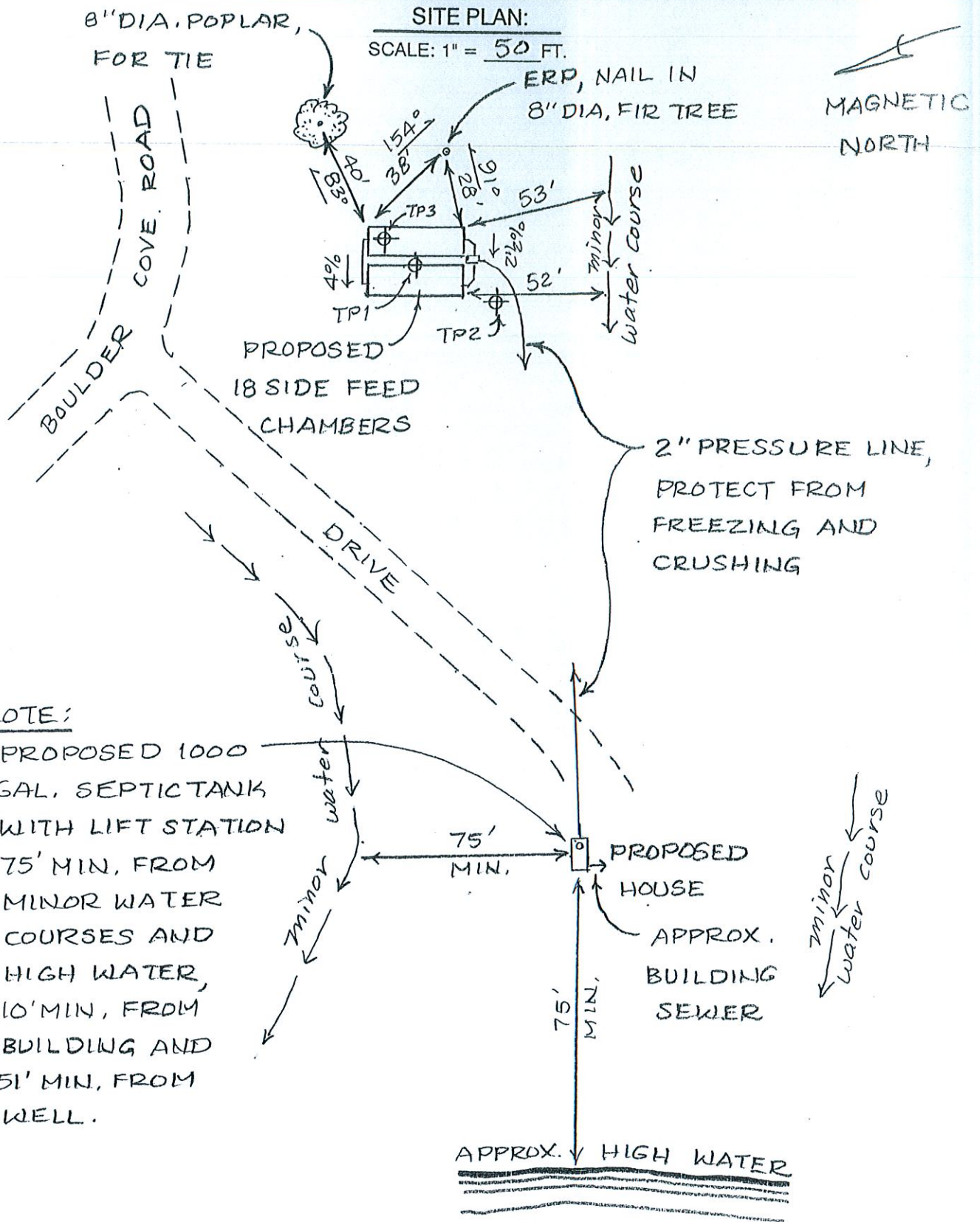
Soil **9** Classification **D** Slope **2 1/2%** Limiting Factor **12"**
Profile Condition Depth

☒ Ground Water
☐ Restrictive Layer
☐ Bedrock
☐ Pit Depth

W. C. 2.9
Site Evaluator's Signature

319
S. E. #

7-6-18
Date



W. C. L.

Site Evaluator's Signature

319

S.E. #

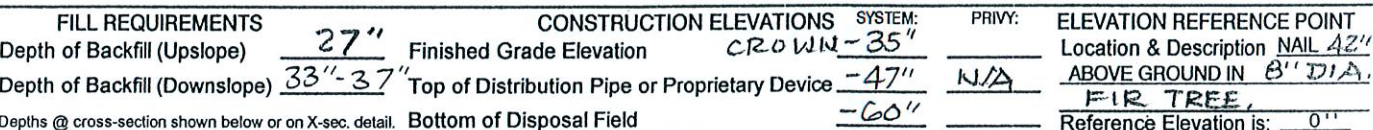
7-6-18

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Owner or Applicant Name
TIM HARPER

SCALE: 1" = 20 FT.



NOTES:

1. Tank(s) must be 8' minimum from building.
2. Grade surrounding area to divert surface water away from system.
3. Well to be 51' minimum from septic tank(s) and 100' minimum from disposal field.
4. All work done adjacent to wetlands and water bodies must be done in compliance with section 12 of the Subsurface Wastewater Disposal Rules. Erosion and sediment control measures must be in accordance with the March 2003 edition of the Maine DEP Handbook "Maine Erosion and Sediment Control BMPs" (DEPW0588).
5. Install septic tank(s) risers 18" in diameter "minimum" to within 6" of finished grade on inlet, cleanout and outlet covers (recommend extending risers to finish grade). Install risers to finish grade of appropriate size to allow pump removal on all in-tank pump chambers and separate pump tanks.
6. Protect lift stations and pump tanks from freezing.
7. Full basement below grade foundation or frost wall must be 20' minimum from edge of disposal field and no full basement, slab, columns or posts must be 15' minimum from edge of disposal field.

7-6-18
Date

